

**PETITION TO THE BOARD OF ASSESSMENT APPEALS
SEPTEMBER SESSION
TOWN OF STONINGTON, CONNECTICUT
GRAND LIST OF OCTOBER 1, 2014**

Please print the following information about each vehicle appealed. All information must be filled out entirely, signed and dated.

Appellant's Name _____

Name and mailing address of party to be sent correspondence:

Make, Model, Year, Plate Number, ID Number:

Reason for appeal: _____

Appellants estimate of value: _____
(attach documentation of value, if applicable)

Signature of property owner or duly authorized agent _____ Date _____

Contact: Area Code & Phone Number _____ Fax No. _____

(attach authorization letter if not owner)